	MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET							SERUL NO / O & ZO-OR APPLICANT(8) CLAIMS					FUNIG DATE 7-15-03		
	Á PK		45788 107	AMENDMENT	AFTER IND	AMEHOMENT			•		,				
1			MD.	DEP	eno.	DEP	1		но	DEP	940	DEP	940	90	
	NO.	DEP	HD.	067				51						_	
-!	+-+	-/		-				52						1_	
2			-					53							
3		1						54					!		
<u> </u>	-+	1						55						-	
5		/						56							
,	-1/	-						57				ļ	 		
	-11							58						-	
•	- V							59						-	
10								60			 		 		
11								61					-	 	
12	11							62						_	
13	1							63					1		
14	_/_							64 65						_	
15	_/_	<u> </u>						66							
16		4						67							
17	-/	-\						68							
18	1-1	-						69							
19	/ 	+						70							
20	1							71							
21 22		7						72				L		-	
23		1						73							
24		4						74							
25		1						75							
26		1						76						-	
27		1						78							
28		1						78			-			_	
29	_/_							80							
30		1				·		81							
31		1						. 82							
32		;						83							
33		4						84							
34		+						85				L			
35		+						86							
37		7						87			ļ	ļ		-	
38	$\overline{}$	-						68							
39								89							
40								90							
41	/	1						91							
47			-					92							
43							1	93					100		
44							1	94						_	
45								95							
46								96 97				_			
47							1	97					1	-	
48								98			-		1	-	
49					, -			100						-	
50					<u> </u>		1						1		
TAL MO.	2			1				TOTAL PID.						1	
		_ ا			4			TOTAL DEP.			-		-	THE P	
AL DEP	17	100		3		4404		CLAIMS							